Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 **CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN** (Column 1) (Column 2) TYPE [**SMALL ENTITY** OR **FOR** NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE **BASIC FEE** 345.00 690.00 OR **TOTAL CLAIMS** minus 20= X\$ 9= X\$18=OR INDEPENDENT CLAIMS minus 3 = X39 =X78= OR 2 30 MULTIPLE DEPENDENT CLAIM PRESENT +130= +260= OR * If the difference in column 1 is less than zero, enter "0" in column 2 OR TOTAL TOTAL CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** AMENDMENT RATE TIONAL RATE TIONAL **AFTER PREVIOUSLY EXTRA** AMENDMENT **FEE** PAID FOR FEE Total Minus X\$ 9= X\$18= OR Independent Minus X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL **AMENDMENT** RATE RATE TIONAL **AFTER PREVIOUSLY EXTRA** AMENDMENT PAID FOR **FEE FEE** Total Minus ** X\$ 9= X\$18≈ OR Independent Minus X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT AMENDMENT** TIONAL RATE TIONAL AFTER **PREVIOUSLY EXTRA** RATE AMENDMEN!T PAID FOR FEE FEE Total Minus X\$9=X\$18= OR Independent Minus = X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR ADDIT. FEE ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION	NUMBER:	09/3	19/353			
		•			•	
Total Fee Calculation						
	Fee Code	Total # Claims	Number Extra X	Fee	Fee	- Total
	Sm./Lg.			Sm. Entity	Lg. Entity	
Basic Filing Fee	201/101			-	690	· 100
Total Claims >20	203/103	24 -20 =	<u>4</u> x		8	· 15
Independent Claims >3	202/102	<u></u>	<u>3</u> x		48	234
Mult. Dep Claim Present	204/104			· .		=
Surcharge	205/105				130	· 130_
English Translation	139					
TOTAL FEE CALCULA	TION					1126.
Fees due upon filing th	ne application:					· .
Total Filing Fees Due	= 5	1126				
Less Filing Fees Subm	ined - \$					
BALANCE DUE	= \$	1124				
Office of Initial Palent I	Examination					
FORM OIPE-RAM-01 (Rev	. 12/97)	Figu	ire 7			٠.,